

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10/807195

FILING DATE

APPLICANT(S)

AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS											
IND	DEP	IND	DEP	IND	DEP							IND	DEP	IND	DEP	IND	DEP
1												51					
2												52					
3												53					
4		2			2							54					
5		2			2							55					
6		2			2							56					
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41												91					
42												92					
43												93					
44												94					
45												95					
46												96					
47												97					
48												98					
49												99					
50												100					
TOTAL IND.	2											TOTAL IND.					
TOTAL DEP.	20											TOTAL DEP.					
TOTAL CLAIMS	22											TOTAL CLAIMS					

Best Available Copy